Case 19-31483-ABA Doc 17 Filed 11/28/19 Entered 11/28/19 12:36:02 Desc Main Document Page 1 of 55

Fill in this infor	mation to identify your	case:		
Debtor 1	Edward J Hovatto	-	LackName	
Debtor 2	First Name Kimberly Macalu	Middle Name so Hovatter	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEE	RSEY	
	19-31483			
(if known)				☐ Check if this is an amended filing
B 104				

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims Against You and Are Not Insiders

If you are an individual filing for bankruptcy under Chapter 11, you must fill out this form. If you are filing under Chapter 7, Chapter 12, or Chapter 13, do not fill out this form. Do not include claims by anyone who is an insider. Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20 percent or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Also, do not include claims by secured creditors unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information.

art 1: List the 20 Unsecured Claims in O	rder from Largest to Smallest. Do Not Include	de Claims by Insiders.	
			Unsecured claim
American France	What is the nature of the claim?	Credit Card	\$_\$16,500.00
American Express PO Box 650448 Dallas, TX 75265-0048	As of the date you file, the claim is: Cl Contingent Unliquidated Disputed None of the above apply	neck all that apply	
	Does the creditor have a lien on your	property?	
	No		
Contact	Yes. Total claim (secured and u	unsecured)	
Contact phone	Unsecured claim	\$	
	What is the nature of the claim?	Medical bill	\$ \$688.41
Apex Asset Management	As of the date you file, the claim is: Cl	hock all that apply	
PO Box 5407 Lancaster, PA 17606-5407	Contingent	neck all that apply	
Landaster, I A 17000 0407	Unliquidated		
	□ Disputed		
	■ None of the above apply		
	Does the creditor have a lien on your	property?	
	No		
Contact	Yes. Total claim (secured and u	unsecured) \$	
	Value of security:	- \$	

B104 (Official Form 104)

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

12/15

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otor 1 otor 2	Edward J Hovatter Kimberly Macaluso Hovatter		Case nu	mber (if known)	19-3148	3
Co	ontact phone		Unsecured claim		\$	
		What	is the nature of the claim?	credit card		\$_\$1,130.94
	est Buy Credit Services	As of	the date you file, the claim is:	Chook all that an	olv.	
-	O Box 9001007		Contingent	спеск ан тпат ар	Diy	
L	ouisville, KY 40290-1007		Unliquidated			
			Disputed			
		■	None of the above apply			
_		Does	the creditor have a lien on you	ir property?		
			No			
	ontact		Yes. Total claim (secured and	Lunsacurad)	\$	
Co	ontact	Ш	Value of security:	a unsecureu)	-\$	
Co	ontact phone		Unsecured claim		- φ \$	
	ontact profic		Onsecured claim		Ψ	
		What	is the nature of the claim?			\$ \$4,000.00
	O.S. Construction LLC	A = = 6	dia data and Clarific dia data ta	Ob a ale all that are	-1.	
	Cobbler Court	AS OF	the date you file, the claim is: Contingent	Check all that ap	oly	
S	ewell, NJ 08080		Unliquidated			
			Disputed			
		ᆜ	None of the above apply			
		•	None of the above apply			
		Does	the creditor have a lien on you			
			No			
Co	ontact		Yes. Total claim (secured and	d unsecured)	\$	
			Value of security:		- \$	
Co	ontact phone		Unsecured claim		\$	
		What	is the nature of the claim?	Charles N. reciever cla		\$ \$176,000.00
	harles Persing, CPA 47 Mount Pleasant Avenue	As of	the date you file, the claim is:	Check all that ap	oly	
W	lest Orange, NJ 07052		Contingent			
			Unliquidated			
			Disputed			
		_	None of the above apply			
		Does	the creditor have a lien on you	r property?		
			No			
	ontact		Yes. Total claim (secured and	l unsecured)	\$	
CO	Sindot		Value of security:	. unocourou)	-\$	
Со	ontact phone		Unsecured claim		\$	
		What	is the nature of the claim?	Pool servic	06	\$ \$1 000 00
_	oastal Pools	iviial	io the nature of the cialiff!	FUUI SEIVIC	<u></u>	\$_\$1,900.00
	01 W. Patcong Avenue	As of	the date you file, the claim is:	Check all that ap	oly	
	inwood, NJ 08221		Contingent	-1,	-	
			Unliquidated			
		П	Disputed			

B 104 (Official Form 104)

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

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Kimberly Macaluso Hovatte	r	Case nu	mber (if known)	19-31483	
		None of the above apply			
	Does	the creditor have a lien on you	ur property?		
		No			
Contact		Yes. Total claim (secured and	d unsecured)	\$	
		Value of security:		- \$	
Contact phone		Unsecured claim		\$	
	What	is the nature of the claim?			\$ \$391.46
Comcast					_
1 Comcast Center		the date you file, the claim is:	Check all that app	oly	
Philadelphia, PA 19103		Contingent Unliquidated			
		Disputed			
		None of the above apply			
	Does	the creditor have a lien on you	ur property?		
		No			
Contact		Yes. Total claim (secured and	d unsecured)	\$	
Contact	ш	Value of security:	a unscourca)	-\$	
Contact phone		Unsecured claim		\$	
	What	is the nature of the claim?	VS cc		\$ \$925.00
					_ \$ <u>\$925.00</u>
PO Box 182273	As of	the date you file, the claim is:		oly	_ \$ <u>\$925.00</u>
PO Box 182273	As of □	the date you file, the claim is: Contingent		oly	_ \$ <u>\$925.00</u>
PO Box 182273	As of □ □	the date you file, the claim is: Contingent Unliquidated		oly	_ \$ <u>\$925.00</u>
PO Box 182273	As of □	the date you file, the claim is: Contingent Unliquidated Disputed		oly	\$ \$925.00
PO Box 182273	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	Check all that app	oly	_ \$ <u>\$925.00</u>
Comenity Bank PO Box 182273 Columbus, OH 43218-2273	As of	the date you file, the claim is: Contingent Unliquidated Disputed	Check all that app	oly	\$ \$925.00
PO Box 182273	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply	Check all that app	oly	\$ \$925.00
PO Box 182273 Columbus, OH 43218-2273	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you	Check all that apply the control of the characteristics and the characteristics are control of the characteristics.	oly \$	\$ \$925.00
PO Box 182273 Columbus, OH 43218-2273	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security:	Check all that apply the control of the characteristics and the characteristics are control of the characteristics.		\$ \$925.00
PO Box 182273 Columbus, OH 43218-2273	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and	Check all that apply the control of the characteristics and the characteristics are control of the characteristics.	\$	\$ \$925.00
PO Box 182273 Columbus, OH 43218-2273 Contact Contact phone	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security:	Check all that apply the control of the characteristics and the characteristics are control of the characteristics.	\$	\$ \$925.00 \$ \$5,500.00
PO Box 182273 Columbus, OH 43218-2273 Contact Contact phone Comenity Capital Bank	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim?	Check all that appure property? d unsecured) Ballard cc	\$ - \$ 	
PO Box 182273 Columbus, OH 43218-2273 Contact Contact Phone Comenity Capital Bank PO Box 183003	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim?	Check all that appure property? d unsecured) Ballard cc	\$ - \$ 	
PO Box 182273 Columbus, OH 43218-2273 Contact Contact Phone Comenity Capital Bank PO Box 183003	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim? the date you file, the claim is: Contingent	Check all that appure property? d unsecured) Ballard cc	\$ - \$ 	
PO Box 182273 Columbus, OH 43218-2273 Contact Contact Phone Comenity Capital Bank PO Box 183003	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim? the date you file, the claim is: Contingent Unliquidated	Check all that appure property? d unsecured) Ballard cc	\$ - \$ 	
PO Box 182273 Columbus, OH 43218-2273 Contact Contact Phone Comenity Capital Bank PO Box 183003	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim? the date you file, the claim is: Contingent Unliquidated Disputed	Check all that appure property? d unsecured) Ballard cc	\$ - \$ 	
PO Box 182273 Columbus, OH 43218-2273 Contact Contact phone Comenity Capital Bank PO Box 183003	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim? the date you file, the claim is: Contingent Unliquidated	Check all that appure property? d unsecured) Ballard cc	\$ - \$ 	
PO Box 182273 Columbus, OH 43218-2273 Contact Contact phone Comenity Capital Bank PO Box 183003	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim? the date you file, the claim is: Contingent Unliquidated Disputed	Check all that applications of the control of the c	\$ - \$ 	
PO Box 182273 Columbus, OH 43218-2273 Contact Contact phone Comenity Capital Bank PO Box 183003	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim? the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No	Check all that applications of the control of the c	\$ - \$ 	
PO Box 182273	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim? the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and	Check all that applications of the control of the c	\$ - \$ boly	
PO Box 182273 Columbus, OH 43218-2273 Contact Contact phone Comenity Capital Bank PO Box 183003 Columbus, OH 43218	As of	the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No Yes. Total claim (secured and Value of security: Unsecured claim is the nature of the claim? the date you file, the claim is: Contingent Unliquidated Disputed None of the above apply the creditor have a lien on you No	Check all that applications of the control of the c	\$ - \$ \$ Doly	

B 104 (Official Form 104)

For Individual Chapter 11 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims

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Debtor 1 Debtor 2	Edward J Hovatter Kimberly Macaluso Hovatter		Case num	ber (if known)	19-31483	
				captial		
	Gary W. Levi					
	5 Penny Lane Medford, NJ 08055	As of ■	the date you file, the claim is: C Contingent	heck all that ap	ply	
'			Unliquidated			
			Disputed			
			None of the above apply			
-		Does	the creditor have a lien on your	property?		
			No			
-	Contact		Yes. Total claim (secured and	unsecured)	\$	
_		_	Value of security:	,	- \$	
	Contact phone		Unsecured claim		\$	
11		What	is the nature of the claim?			\$ \$238,814.00
	Internal Revenue Service PO Box 931000	As of	the date you file, the claim is: C	heck all that an	nlv	
	Louisville, KY 40293-1000		Contingent		F- ,	
	•		Unliquidated			
			Disputed			
			None of the above apply			
_		Does	the creditor have a lien on your	property?		
_			No			
	Contact		Yes. Total claim (secured and	unsecured)	\$	
-	Contact phone		Value of security: Unsecured claim		- \$	
12		What	is the nature of the claim?	HFSL start- guaranty: 1	up loan /3 plus fees	\$ \$153,000.00
	Kenneth and Randi Friedman 836 Matlack Drive	As of	the date you file, the claim is: C	heck all that ap	ply	
	Moorestown, NJ 08057		Contingent	• •	,	
	·		Unliquidated			
			Disputed			
			None of the above apply			
_		Does	the creditor have a lien on your	property?		
			No			
-	Contact		Yes. Total claim (secured and	unsecured)	\$	
_			Value of security:		- \$	
	Contact phone		Unsecured claim		\$	
13		What	is the nature of the claim?	Medical ser	vices	\$ \$939.43
	Lourdes Cardiology Services	As of	the date you file, the claim is: C	hack all that an	oly	
				moon an mai ap	Piy	
	PO Box 824699 Philadelphia PA 19182-4699		Contingent			
	PO Box 824699 Philadelphia, PA 19182-4699	_	Contingent Unliquidated			
			_			

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tor 1 tor 2	Edward J Hovatter Kimberly Macaluso Hovatter		Case	e number (if known)	19-31483	
		Does	the creditor have a lien on	your property?		
			No			
_	Contact		Yes. Total claim (secured	d and unsecured)	\$	
		_	Value of security:	,	- \$	
(Contact phone		Unsecured claim		\$	
		What	is the nature of the claim?	Settlement DiFiore, Ma Ventures, I Construction	adison nch x Inch	\$ \$28,000.00
	Madison Ventures LLC et al.					
	413 Teal Court	_	the date you file, the claim	is: Check all that ap	ply	
l	Moorestown, NJ 08057		Contingent			
			Unliquidated			
			Disputed			
			None of the above apply			
_		Does	the creditor have a lien on	your property?		
			No			
_	Contact		Yes. Total claim (secured	d and unsecured)	\$	
			Value of security:	,	- \$	
(Contact phone		Unsecured claim		\$	
- 1	New Jersey American Water PO Box 371331 Pittsburgh, PA 15250-7331		is the nature of the claim? the date you file, the claim Contingent Unliquidated Disputed None of the above apply		ply	_ \$ <u>\$650.00</u>
_		Does	the creditor have a lien on	your property?		
_			No			
(Contact		Yes. Total claim (secured	d and unsecured)	\$	
_			Value of security:		- \$	
(Contact phone		Unsecured claim		\$	
		What	is the nature of the claim?	Medical bil	l	\$ \$3,304.46
	New Jersey Urology LLC	A = = f	the data valutile the eleim	io. Charle all that an	- l	
	1515 Broad Street, Suite B130		the date you file, the claim Contingent	i is. Oneok all that ap	hià	
	Bloomfield, NJ 07003-3002		Unliquidated			
			Disputed			
			None of the above apply			
_		Does	the creditor have a lien on	your property?		
			No			
_		_	No	d and unaccured)	¢	
(Contact		Yes. Total claim (secured	and unsecured)	\$	
-	Contact phone		Value of security: Unsecured claim		- \$	
(Contact phone		Unsecurea ciaim		\$	

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Debtor 2			Case	e number (if known)	19-3148	33
17	<u>. </u>	What	is the nature of the claim?	credit card		\$ \$5,800.00
	Nordstrom PO Box 79139 Phoenix, AZ 85062-9139	As of □ □ □	the date you file, the claim Contingent Unliquidated Disputed None of the above apply	is: Check all that ap	ply	
		Does	the creditor have a lien on	your property?		
			No			
	Contact		Yes. Total claim (secured Value of security:	and unsecured)	\$ -\$	
	Contact phone		Unsecured claim		\$	
18		What	is the nature of the claim?	Medical bil		\$_\$4,646.64
	Optimum Outcome PO Box 660943	As of	the date you file, the claim	is: Check all that an	nlv	
	Dallas, TX 75226-0943		Contingent	is. Officer all triat ap	Piy	
	Dullus, 17 10220 0040		Unliquidated			
			Disputed			
			None of the above apply			
		Does	the creditor have a lien on	your property?		
			No			
	Contact		Yes. Total claim (secured	and unsecured)	\$	
			Value of security:		- \$	
	Contact phone		Unsecured claim		\$	
19		What	is the nature of the claim?	2018 Incom	е Тах	\$ \$22,980.00
	State of New Jersey	As of	the date you file, the claim	is: Chack all that an	olv	
	NJ Division of Taxation Revenue Processing Center		Contingent	is. Oneck all that ap	Piy	
	PO Box 643		Unliquidated			
	Trenton, NJ 08646-0643		Disputed			
			None of the above apply			
		Does	the creditor have a lien on	your property?		
			No			
	Contact		Yes. Total claim (secured	and unsecured)	\$	
		_	Value of security:	,	- \$	
	Contact phone		Unsecured claim		\$	
20		What	is the nature of the claim?	Credit card		\$ \$16,869.29
	TD Bank					
	PO Box 84037		the date you file, the claim	is: Check all that ap	ply	
	Columbus, GA 31908-4037		Contingent			
			Unliquidated			
			Disputed			
			None of the above apply			
		Does	the creditor have a lien on	your property?		
			No	- ·		

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Debtor			Case number (if known)	19-31483
	Contact		Yes. Total claim (secured and unsecured) Value of security:	\$ -\$
	Contact phone	-	Unsecured claim	\$
		rmation	provided in this form is true and correct.	
A /9	V Edward J Hovatter		X /s/ Kimberly Macaluso Hov	atter
	s/ Edward J Hovatter dward J Hovatter		X /s/ Kimberly Macaluso Hov Kimberly Macaluso Hovatt	
E				

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Fill in this info	rmation to identify your	case:	·	
Debtor 1	Edward J Hovatte	er		
	First Name	Middle Name	Last Name	
Debtor 2	Kimberly Macalus	so Hovatter		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number	19-31483			
(if known)				☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your	assets
			of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	2,604,900.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	60,084.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	2,664,984.00
Pai	t 2: Summarize Your Liabilities		
			liabilities Int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	2,213,236.84
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	261,794.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	470,763.58
	Your total liabilities	\$	2,945,794.42
Pai	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	23,284.98
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	29,749.79
Pai	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other s	chedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

the court with your other schedules.

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Debtor 1	Edward J Hovatter	ŭ	
Debtor 2	Kimberly Macaluso Hovatter	Case number (if known)) 19-3148 3

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

25,000.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	261,794.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	261,794.00

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	Case 19-	31403-A	BA DUCI		ument Page 10 of 55	.0/19 12	.30.02	Desc Main
Fill in	this information	on to identify	your case and th					
Debtor		dward J Ho						
Dobioi		irst Name		Name	Last Name			
Debtor	r 2 K	Cimberly Ma	caluso Hovatte	er				
(Spouse	e, if filing)	irst Name	Middle	Name	Last Name			
United	l States Bankru	ptcy Court for	the: DISTRICT	OF NEV	V JERSEY			
Case r	number <u>19-3</u>	1483						☐ Check if this is an amended filing
	cial Form		-					12/15
think it i	fits best. Be as attion. If more spare every question.	complete and a ice is needed, a	accurate as possibl attach a separate sl	e. If two heet to th	only once. If an asset fits in more than one married people are filing together, both are its form. On the top of any additional pages Estate You Own or Have an Interest In	equally resp	onsible for su	pplying correct
_	o. Go to Part 2. es. Where is the	property?						
1.1				What	is the property? Check all that apply			
	E. Aberdeer				Single-family home	Do not ded	luct secured cla	aims or exemptions. Put
St	treet address, if avai	lable, or other des	cription		Duplex or multi-unit building			d claims on Schedule D: ns Secured by Property.
					Condominium or cooperative			
					Manufactured or mobile home	_		
C	Ocean City	NJ	08226-0000		Land	Current va entire pro		Current value of the portion you own?
C	ity	State	ZIP Code		Investment property	\$2,2	50,000.00	\$2,250,000.00
					Timeshare Other	(such as f		our ownership interest ancy by the entireties, or
				Who	has an interest in the property? Check one Debtor 1 only		, by the En	tireties
C	Cape May				Debtor 2 only		,,	
	County				Debtor 1 and Debtor 2 only			
					At least one of the debtors and another		k if this is com structions)	munity property

property identification number:

Other information you wish to add about this item, such as local

Official Form 106A/B Schedule A/B: Property page 1 Case 19-31483-ABA Doc 17 Filed 11/28/19 Entered 11/28/19 12:36:02 Desc Main Document Page 11 of 55

Debt Debt		Edward J Ho Kimberly Ma					Case nu	ımber (if known)	19-3	1483
	If you	own or have	more	than one, list		is the preparty? Cheek all that each				
1.2	A1A 1A	th Street			wnat	is the property? Check all that apply				
-	414 14th Street Street address, if available, or other description			cription		Single-family home Duplex or multi-unit building Condominium or cooperative	t	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.		claims on Schedule D:
-	Hamme City Atlanti County		NJ State	08037-0000 ZIP Code	_ □ _ □ Othe		k one -	such as fee simple life estate), if known the life estate is the life estate in the life	re of your le, tena own. e Ent	Current value of the portion you own? \$354,900.00 our ownership interest ency by the entireties, or ireties munity property
Part 2	Desc	ou have attach	ed for	Part 1. Write tha	at numbe	your entries from Part 1, includin r here				\$2,604,900.00
some 3. C a	one else	e drives. If you l	ease a		ort it on S	ny vehicles, whether they are reg Schedule G: Executory Contracts ar prcycles			any ve	nicles you own that
	163									
3.1	Make: Model:	Mercedes C300	Benz		Who has a ☐ Debtor	n interest in the property? Check one 1 only	1	the amount of any	secure	ims or exemptions. Put d claims on Schedule D: ns Secured by Property.
	• • •	2015 ximate mileage: nformation:				2 only 1 and Debtor 2 only one of the debtors and another		Current value of t entire property?	he	Current value of the portion you own?
				ı		if this is community property ructions)	_	\$16,500	.00	\$16,500.00
3.2	Make:	BMW X-1			Who has a ☐ Debtor	n interest in the property? Check one	1	the amount of any	secure	ims or exemptions. Put d claims on Schedule D: as Secured by Property.
	Year:	2014			Debtor :	· ·				
	Approx	imate mileage:			_	1 and Debtor 2 only		Current value of t entire property?	ne	Current value of the portion you own?
		nformation:		_	_	one of the debtors and another				
	Salva	ge title								
		_		1		if this is community property ructions)	-	\$5,500	.00	\$5,500.00

Official Form 106A/B Schedule A/B: Property page 2

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Debtor 1 Debtor 2		ward J Hovatter nberly Macaluso Hovatte	r Ca	ase number (if known)	19-31483
	lake:	Range Rover Evoque	Who has an interest in the property? Check one Debtor 1 only	the amount of any se	ed claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property.
Υe	ear:	2013	■ Debtor 2 only	Current value of the	Current value of the
Ap	pproxima	te mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Ot	ther infor	mation:	At least one of the debtors and another		
Pı	rior ac	cident, salvage value	_	67.000.0	0 67,000,00
or	nly		Check if this is community property (see instructions)	\$7,000.0	97,000.00
3.4 M	lake:	Mercedes Benz	Who has an interest in the property? Check one		ed claims or exemptions. Put cured claims on Schedule D:
M	lodel:	GLA-250	Debtor 1 only		Claims Secured by Property.
Ye	ear:	2015	Debtor 2 only	Current value of the	Current value of the
Ap	pproxima	ite mileage:	Debtor 1 and Debtor 2 only	entire property?	portion you own?
Ot	ther infor	mation:	At least one of the debtors and another		
			Check if this is community property (see instructions)	\$15,000.0	0 \$15,000.00
House	own or ehold g	oods and furnishings ajor appliances, furniture, line	interest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
			hen table, 4 chairs, 1 bench, 4 beds, 4 dress 2 occasional chairs, 1 coffee table, 1 ottomar s		\$10,000.0
□ No	<i>nples:</i> Te in	cluding cell phones, cameras,	ideo, stereo, and digital equipment; computers, printe media players, games	rs, scanners; music coll	ections; electronic devices
		1 Television, 2	2 cellphones		\$2,000.00
	nples: Ai of	of value ntiques and figurines; painting ther collections, memorabilia,	s, prints, or other artwork; books, pictures, or other art	t objects; stamp, coin, o	r baseball card collections;

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Debtor 1 Debtor 2	Edward J Ho Kimberly Ma	ovatter acaluso Hovatter		Case number (if known)	19-31483
	nent for sports a les: Sports, photo musical instr	ographic, exercise, and other	hobby equipment; bicycles, pool t	ables, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ No □ Yes.	Describe				
10. Firearr <i>Examµ</i> ■ No		s, shotguns, ammunition, and	d related equipment		
☐ Yes.	Describe				
11. Clothe <i>Exam</i> ☐ No		othes, furs, leather coats, de	signer wear, shoes, accessories		
	Describe				
		Various work and info	ormal clothes		\$2,000.00
□ No		welry, costume jewelry, enga	agement rings, wedding rings, heir	loom jewelry, watches, gems, g	old, silver
		Various small jewlery			\$500.00
■ No □ Yes.	Give specific inf	formation of all of your entries from I	I not already list, including any l		\$14,500.00
	escribe Your Finan wn or have any I	cial Assets egal or equitable interest i	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No		have in your wallet, in your h	ome, in a safe deposit box, and or	n hand when you file your petition	
_ 100				Cash	\$250.00
Examp			counts; certificates of deposit; shar s with the same institution, list eac		nouses, and other similar
□ No ■ Yes			Institution name:		
		17.1. Checking	TD Bank #****52		\$1,000.00

Official Form 106A/B Schedule A/B: Property page 4

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Debtor 1 Debtor 2	Edward J Hovatter Kimberly Macaluse			Case number (if known)	19-31483
	17.2	. Checking	TD Bank account #******	*68	\$275.00
	17.3	. Checking	Ocean First account #***	****39	\$10.00
	17.4	Checking account assoicated with HELOC	Republic Bank account	****** 53	\$15.00
	17.5	. Savings	American Express Perso	onal Savings account	\$34.00
Exam ■ No □ Yes. 19. Non-p		nent accounts with broker	rage firms, money market accounne: ted and unincorporated busine		st in an LLC, partnership, and
■ Yes	. Give specific informatio	n about themame of entity:		% of ownership:	
		ovatter Friedman Sa	outelli & Levi I I P	75 %	Unknown
Nego Non-r ■ No	nment and corporate be tiable instruments include negotiable instruments are	onds and other negotial personal checks, cashie e those you cannot transf	ble and non-negotiable instrumrs' checks, promissory notes, and er to someone by signing or deliv	I money orders.	Unknown
Exam ■ No	ment or pension account pples: Interests in IRA, ER	IISA, Keogh, 401(k), 403((b), thrift savings accounts, or othe Institution name:	er pension or profit-sharing	plans
Your		sits you have made so tha	at you may continue service or us olic utilities (electric, gas, water), to		nies, or others
			Institution name or individual:		
■ No		odic payment of money to	o you, either for life or for a numb	er of years)	
24. Interes		in an account in a quali	ified ABLE program, or under a	qualified state tuition pro	ogram.
	Institution	name and description. S	eparately file the records of any in	nterests.11 U.S.C. § 521(c)	:
25. Trusts	s, equitable or future int	erests in property (othe	r than anything listed in line 1)	and rights or powers exe	ercisable for your benefit

■ Yes. Give specific information about them...

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Debtor 1 Debtor 2	Edward J Hovatter Kimberly Macaluso	Hovatter	Ca	se number (if known)	19-31483
		Kimberly Macaluso Hovatter, Trust Irrevocable Life Insurance Trust (o Financial life insurance policies on	wns Metlife, Prud	ential and US	Unknown
Exan ■ No	nples: Internet domain name	s, trade secrets, and other intellectual puss, websites, proceeds from royalties and l			
27. Licen <i>Exan</i> No		general intangibles usive licenses, cooperative association ho	oldings, liquor license:	s, professional license	s
■ Yes	. Give specific information	NJ Law License			Unknown
		PA Law License			Unknown
Money of	r property owed to you?				Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	efunds owed to you . Give specific information a	about them, including whether you already		the tax years	
		2017 and 2018: Returns file amended	d, to be	Federal	Unknown
		2017 and 2018, returns filed amended	l, to be	State	Unknown
<i>Exan</i> ■ No	y support nples: Past due or lump sum Give specific information	alimony, spousal support, child support, i	maintenance, divorce	settlement, property s	settlement
Exan ■ No		lity insurance payments, disability benefits s you made to someone else	s, sick pay, vacation p	ay, workers' compen	sation, Social Security
31. Intere	ests in insurance policies	fe insurance; health savings account (HSA	A); credit, homeowner	's, or renter's insuranc	ce
■ No □ Yes		any of each policy and list its value.	Beneficiary:		Surrender or refund value:
If you		due you from someone who has died ng trust, expect proceeds from a life insura	ance policy, or are cu	rrently entitled to recei	ve property because

Official Form 106A/B Schedule A/B: Property page 6

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Debtor 1 Debtor 2	Edward J Hovatter Kimberly Macaluso Hov	ratter Case number (if known	19-31483
☐ Yes	. Give specific information		
Exam □ No -		er or not you have filed a lawsuit or made a demand for payment sputes, insurance claims, or rights to sue	
		Against D. Max Friedman: Breach of fiduciary duty, contribution, contract breach, fraud, fraud in the inducement	Unknown
		Against Jeffrey Cohen, Flaster/Greenberg: abuse of civil process, stay violation	Unknown
		Against Hovatter Friedman Saputelli & Levi LLP: Indemnification, contribution, distribution	Unknown
		Against Matthew Weisberg, Esq.: legal malpractice	Unknown
		Against Gregory Saputelli, Esq.: breach of contract, fraud in the inducement	Unknown
□ No	contingent and unliquidated Describe each claim	Against Kenneth and Randi Friedman: fraud, fraud in the inducement, stay violation	to set off claims Unknown
		Against Charles N. Persing, as Reciever for Hovatter, Friedman Saputelli & Levi LLP: breach of fiduciary duty	Unknown
		Against Gary Levi: breach of contract, breach of fiduciary duty, fraudulent transfer	Unknown
■ No	nancial assets you did not all	ready list	
		entries from Part 4, including any entries for pages you have attached	\$1,584.00
Part 5: D	escribe Any Business-Related Pro	operty You Own or Have an Interest In. List any real estate in Part 1.	
■ No. G	own or have any legal or equitable to Part 6. Go to line 38.	le interest in any business-related property?	
	escribe Any Farm- and Commerci you own or have an interest in farml	al Fishing-Related Property You Own or Have an Interest In. and, list it in Part 1.	
<u></u> -			

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

Official Form 106A/B Schedule A/B: Property

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Deb Deb	tor 1 tor 2	Edward J Hovatter Kimberly Macaluso Hovatter		Case number (if known)	19-31483
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That You I	Did Not List Above		
	•	have other property of any kind you did not already list? les: Season tickets, country club membership			
_		Give specific information			
54.	Add ti	he dollar value of all of your entries from Part 7. Write that	number here		\$0.00
Part	8:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$2,604,900.00
56.	Part 2	: Total vehicles, line 5	\$44,000.00		
57.	Part 3	: Total personal and household items, line 15	\$14,500.00		
58.	Part 4	: Total financial assets, line 36	\$1,584.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$60,084.00	Copy personal property to	stal \$60,084.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$2,664,984.00

Official Form 106A/B Schedule A/B: Property page 8

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Fill in this info	rmation to identify your	case:		
Debtor 1	Edward J Hovatte	er		
	First Name	Middle Name	Last Name	
Debtor 2	Kimberly Macalus	so Hovatter		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERS	EY	
Case number	19-31483			
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify th	e Property	You Claim	as Exempt
---------	-------------	------------	-----------	-----------

	☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)								
	■ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)								
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.					
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption				
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.					
	9 E. Aberdeen Road Ocean City, NJ 08226 Cape May County	\$2,250,000.00		\$50,300.00	11 U.S.C. § 522(d)(1)				
	Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit					
	414 14th Street Hammonton, NJ 08037 Atlantic County	\$354,900.00		\$2,650.00	11 U.S.C. § 522(d)(5)				
	Line from Schedule A/B: 1.2			100% of fair market value, up to any applicable statutory limit					
	2014 BMW X-1 Salvage title	\$5,500.00		\$4,000.00	11 U.S.C. § 522(d)(2)				
	Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit					
	2013 Range Rover Evoque Prior accident, salvage value only	\$7,000.00		\$4,000.00	11 U.S.C. § 522(d)(2)				
	Line from Schedule A/B: 3.3			100% of fair market value, up to any applicable statutory limit					
	2 sofas, 1 kitchen table, 4 chairs, 1 bench, 4 beds, 4 dressers, 3 night	\$10,000.00		\$10,000.00	11 U.S.C. § 522(d)(3)				
	tables, 2 occasional chairs, 1 coffee table, 1 ottoman, 2 serving chests Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit					

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Debtor	2 Kimberly Macaluso Hovatter			Case number (if known)	19-31483	
	ief description of the property and line on hedule A/B that lists this property	Current value of the Amoun portion you own		ount of the exemption you claim	Specific laws that allow exemption	
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.		
	Television, 2 cellphones	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)	
LII	le IIIIII Schedule AVD. 1.1			100% of fair market value, up to any applicable statutory limit		
	arious work and informal clothes	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(3)	
Lir	ne from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit		
	arious small jewlery	\$500.00		\$500.00	11 U.S.C. § 522(d)(4)	
LII	ie IIIIII Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit		
	re you claiming a homestead exemption ubject to adjustment on 4/01/22 and every No Yes. Did you acquire the property cover No No	3 years after that for ca	ises fi	ŕ	,	

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	Document F	age 20 01 33		
Fill in this information to identify yo	ur case:			
Debtor 1 Edward J Hova	itter			
First Name	Middle Name L	_ast Name	_	
Debtor 2 Kimberly Maca			_	
(Spouse if, filing) First Name	Middle Name L	Last Name		
United States Bankruptcy Court for the	DISTRICT OF NEW JERSEY		_	
Case number (if known) 19-31483			_	if this is an
			amend	ded filing
Official Form 106D				
Schedule D: Creditors	s Who Have Claims Se	ecured by Proper	ty	12/15
Be as complete and accurate as possible. is needed, copy the Additional Page, fill it number (if known).				
1. Do any creditors have claims secured b	by your property?			
☐ No. Check this box and submit	this form to the court with your other sc	chedules. You have nothing else	e to report on this form.	
Yes. Fill in all of the information	·			
	below.			
Part 1: List All Secured Claims		. Column A	Column B	Column C
	more than one secured claim, list the creditons a particular claim, list the other creditors in tical order according to the creditor's name.	or separately	Value of collateral that supports this claim	Unsecured portion If any
2.1 360 Capital LLC	Describe the property that secures the		\$354,900.00	\$0.00
Creditor's Name	414 14th Street Hammonton, N 08037 Atlantic County	11)		
1003 Shore Road Linwood, NJ 08221	As of the date you file, the claim is: Che apply. Contingent	eck all that		
Number, Street, City, State & Zip Code	Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as mo	rtgage or secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	,		
Check if this claim relates to a	Other (including a right to offset)	usiness Loan		
community debt				
Date debt was incurred	Last 4 digits of account number	·		
2.2 Citizens Bank NA	Describe the property that secures the	claim: \$13,453.00	\$15,000.00	\$0.00
Creditor's Name	2015 Mercedes Benz GLA-250			
One Citizens Plaza Providence, RI 02903	As of the date you file, the claim is: Cheapply. Contingent	eck all that		
Number, Street, City, State & Zip Code	Unliquidated			
Who awas the debt? Charles	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as more car loan)	rtgage or secured		
■ Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mecha	anic's lien)		
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit	· - /		
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number	8572		

Official Form 106D

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Debtor 1 Edward J Hovatter		Case number (if known)	19-31483	
First Name Middle Na				
Debtor 2 Kimberly Macaluso Hov				
First Name Middle Na	ame Last Name			
2.3 Jersey Shore Federal	Book the discount of the control of	\$15,000.00	\$16,500.00	\$0.00
Credit Union Creditor's Name	Describe the property that secures the claim:	1 - 413,000.00	Ψ10,300.00	Ψ0.00
Creditor's Name	2015 Mercedes Benz C300			
1434 New Road	As of the date you file, the claim is: Check all that	J		
Northfield, NJ 08225	apply.			
Number, Street, City, State & Zip Code	Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	_			
Debtor 2 only	An agreement you made (such as mortgage or car loan)	secured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another ☐ Judgment lien from a lawsuit				
Check if this claim relates to a	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number 503	0		
2.4 Republic Bank	Describe the property that secures the claim:	\$233,731.99	\$354,900.00	\$0.00
Creditor's Name	414 14th Street Hammonton, NJ	<u>Ψ233,731.33</u>	Ψ337,300.00	Ψ0.00
	08037 Atlantic County			
50 South 16th Street				
Suite #2400	As of the date you file, the claim is: Check all that apply.			
Philadelphia, PA 19102	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
, , , , , , , , , , , , , , , , , , , ,	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only	■ An agreement you made (such as mortgage or	secured		
☐ Debtor 2 only	car loan)	secureu		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset) HELOC			
community debt	— Other (including a right to onset)			
Date debt was incurred	Last 4 digits of account number 380	1		

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Debtor 1 Edwar	rd J Hovatter		Case number (if known)	19-31483	
First Nam					
	erly Macaluso Hov				
First Nam	e Middle N	ame Last Name			
2.5 Shellpoint Servicing	Mortgage	Describe the property that secures the claim	s1,894,628.93	\$2,250,000.00	\$0.00
Creditor's Name		9 E. Aberdeen Road Ocean City, No.			
		08226 Cape May County			
PO Box 61	9063 75261-9063	As of the date you file, the claim is: Check all t apply.	hat		
	City, State & Zip Code	Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated ☐ Disputed			
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only☐ Debtor 2 only		An agreement you made (such as mortgage car loan)	or secured		
■ Debtor 1 and Del	htor 2 only	☐ Statutory lien (such as tax lien, mechanic's li	ien)		
	e debtors and another	☐ Judgment lien from a lawsuit	,		
■ Check if this cla		Other (including a right to offset)			
community del					
Date debt was incu	rred	Last 4 digits of account number 4	532		
	ammonton	Describe the property that secures the claim	\$3,422.92	\$354,900.00	\$0.00
Creditor's Name		414 14th Street Hammonton, NJ 08037 Atlantic County			
100 Centra	al Avenue	As of the date you file, the claim is: Check all t	hat		
	on, NJ 08037	apply. □ Contingent			
	City, State & Zip Code	☐ Unliquidated			
, ,		☐ Disputed			
Who owes the del	bt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage	or secured		
Debtor 2 only		car loan)			
■ Debtor 1 and De	btor 2 only	Statutory lien (such as tax lien, mechanic's li	ien)		
☐ At least one of th	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla	aim relates to a	Other (including a right to offset)			
community del	ot				
Date debt was incu	rred	Last 4 digits of account number			
	-	olumn A on this page. Write that number here:	\$2,213,236	.84	
If this is the last p Write that numbe		the dollar value totals from all pages.	\$2,213,236	.84	
Part 2: List Oth	ers to Be Notified fo	r a Debt That You Already Listed			
trying to collect fro than one creditor for	m you for a debt you o	e notified about your bankruptcy for a debt the we to someone else, list the creditor in Part 1, t you listed in Part 1, list the additional creditor his page.	and then list the collection age	ncy here. Similarly, if you	have more
	er, Street, City, State &	Zip Code C	On which line in Part 1 did you ente	er the creditor? 2.3	
	McDowell, Esq. aw Group		not 4 digits of account number		
	aw Group ngs Highway Suite		.ast 4 digits of account number	-	
	II, NJ 08034				

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			Document Pag	e 23 of 5	55		
Fill in	this inforr	mation to identify your case:					
Debtor	r 1	Edward J Hovatter					
Dobto.	•		Middle Name Last N	ame			
Debtor	r 2	Kimberly Macaluso Hov	ratter				
(Spouse	if, filing)	First Name	Middle Name Last N	ame			
United	States Ba	nkruptcy Court for the: DIST	RICT OF NEW JERSEY				
Case r	_	19-31483				Charle	if this is an
(II KIIOWI	')					_	if this is an led filing
Be as co any exe Schedu Schedu left. Atta name an Part 1	omplete and cutory confided in Execute D: Credit ach the Cornd case nut	d accurate as possible. Use Part 1 tracts or unexpired leases that coutory Contracts and Unexpired Leases Who Have Claims Secured by trinuation Page to this page. If your ber (if known). If of Your PRIORITY Unsecured claims have priority unsecured claims		s and Part 2 fo utory contract clude any cre copy the Part	s on Schedule A/B: ditors with partially you need, fill it out	Property (Official For secured claims that a number the entries i	m 106A/B) and on are listed in n the boxes on the
	Yes.						
2. Lis	at all of you entify what ty ssible, list th	pe of claim it is. If a claim has both pe claims in alphabetical order accord	editor has more than one priority unse riority and nonpriority amounts, list th ling to the creditor's name. If you hav claim, list the other creditors in Part 3.	at claim here a	nd show both priority	and nonpriority amoun	ts. As much as
(Fo	or an explan	ation of each type of claim, see the ir	nstructions for this form in the instruct	ion booklet.)			
					Total claim	Priority amount	Nonpriority amount
					\$238,814.0		
2.1	Interna	Revenue Service	Last 4 digits of account numb	er	(# 000 04 4 00	\$0.00
	PO Box	editor's Name 3 931000	When was the debt incurred?	2017-20)18	_	
		Ile, KY 40293-1000 treet City State Zip Code	As of the date you file, the cla	im is: Check a	all that apply		
W	/ho incurre	d the debt? Check one.	☐ Contingent		7		
	Debtor 1 o	only	☐ Unliquidated				
	Debtor 2 o	only	■ Disputed				
	Debtor 1 a	and Debtor 2 only	Type of PRIORITY unsecured	claim:			
	At least or	ne of the debtors and another	☐ Domestic support obligation:				
	Check if t	his claim is for a community debt	t Taxes and certain other deb	ts you owe the	government		
		subject to offset?	☐ Claims for death or personal	•	•		

□ No

Yes

Other. Specify

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State of New Jersey Priority Creditor's Name NJ Division of Taxation Revenue Processing Center PO Box 643 Trenton, NJ 08646-0643 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? Last 4 digits of account number \$22,980.00 \$22,980.00 When was the debt incurred? Contingent Contingent Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated	\$0.00
Priority Creditor's Name NJ Division of Taxation Revenue Processing Center PO Box 643 Trenton, NJ 08646-0643 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt When was the debt incurred? When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government	
PO Box 643 Trenton, NJ 08646-0643 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: At least one of the debtors and another Check if this claim is for a community debt As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Taxes and certain other debts you owe the government	
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt As of the date you file, the claim is: Check all that apply Contingent Unliquidated Disputed Type of PRIORITY unsecured claim: Domestic support obligations Taxes and certain other debts you owe the government	
Who incurred the debt? Check one. □ Debtor 1 only □ Unliquidated □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Taxes and certain other debts you owe the government	
□ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ Type of PRIORITY unsecured claim: □ At least one of the debtors and another □ Domestic support obligations □ Check if this claim is for a community debt □ Taxes and certain other debts you owe the government	
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Taxes and certain other debts you owe the government	
□ Disputed □ Debtor 1 and Debtor 2 only Type of PRIORITY unsecured claim: □ At least one of the debtors and another □ Domestic support obligations □ Check if this claim is for a community debt □ Taxes and certain other debts you owe the government	
☐ At least one of the debtors and another ☐ Domestic support obligations ☐ Check if this claim is for a community debt ☐ Taxes and certain other debts you owe the government	
Check if this claim is for a community debt Taxes and certain other debts you owe the government	
_ · · · · · · · · · · · · · · · · · · ·	
_ · · · · · · · · · · · · · · · · · · ·	
is the Grain Supred to Oriset? Grains for death of DetSonal Infort While you were infoxicated.	
□ No □ Other. Specify	
Yes 2018 Income Tax	
 Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonprior unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation 	1. If more
Part 2. Total claim	
4.1 American Express Last 4 digits of account number 1008 \$	16,500.00
Nonpriority Creditor's Name PO Box 650448 When was the debt incurred? various	
Dallas, TX 75265-0048 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	
□ Pohter 1 only	
☐ Debtor 2 only ☐ Contingent ☐ Unliquidated	
■ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community debt □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset? report as priority claims	
Diligations and ing out of a separation agreement of divorce that you did not	

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	r 1 Edward J Hovatter r 2 Kimberly Macaluso Hovatter	Case number (if known) 19-31483	
4.2	Apex Asset Management	Last 4 digits of account number 8912	\$688.41
	Nonpriority Creditor's Name PO Box 5407 Lancaster, PA 17606-5407	When was the debt incurred? 2018	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical bill	
4.3	Atlantic City Electric Nonpriority Creditor's Name	Last 4 digits of account number	\$0.00
	PO Box 17006 Wilmington, DE 19850-7006	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Notice purposes	
4.4	Best Buy Credit Services Nonpriority Creditor's Name	Last 4 digits of account number 8408 \$	1,130.94
	PO Box 9001007 Louisville, KY 40290-1007	When was the debt incurred? various	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	☐ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	□ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt	\square Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify credit card	

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	or 1 Edward J Hovatter Kimberly Macaluso Hovatter	Case number (if known) 19-31483	
4.5	C.O.S. Construction LLC	Last 4 digits of account number	\$4,000.00
	Nonpriority Creditor's Name 5 Cobbler Court Sewell, NJ 08080	When was the debt incurred?	<u> </u>
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	
4.6	Charles Persing, CPA	Last 4 digits of account number	\$176,000.00
	Nonpriority Creditor's Name 347 Mount Pleasant Avenue West Orange, NJ 07052	When was the debt incurred? 2018	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	Contingent	
	Debtor 1 only	_	
	Debtor 2 only	Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□ No		
	Yes	■ Other. Specify Charles N. Persing reciever claim	
4.7	Coastal Pools	Last 4 digits of account number	\$1,900.00
	Nonpriority Creditor's Name 501 W. Patcong Avenue Linwood, NJ 08221	When was the debt incurred? 2019	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	□ Unliquidated	
	■ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	■ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Pool services	

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	1 Edward J Hovatter 2 Kimberly Macaluso Hovatter	Case number (if known) 19-31483		
4.8	Comcast	Last 4 digits of account number	\$391.46	
	Nonpriority Creditor's Name 1 Comcast Center Philadelphia, PA 19103	When was the debt incurred? various	V	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	■ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts		
	Yes	Other. Specify		
4.9	Comenity Bank Nonpriority Creditor's Name	Last 4 digits of account number 4409	\$250.00	
	PO Box 182273 Columbus, OH 43218-2273	When was the debt incurred? various		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:		
	■ Check if this claim is for a community	☐ Student loans		
	debt	Obligations arising out of a separation agreement or divorce that you did not		
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts		
	■ No			
	Yes	■ Other. Specify Pier 1 credit card		
4.1 0	Comenity Bank	Last 4 digits of account number 9995	\$925.00	
	Nonpriority Creditor's Name PO Box 182273 Columbus, OH 43218-2273	When was the debt incurred? various		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply		
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only			
	\square At least one of the debtors and another			
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims		
	No	Debts to pension or profit-sharing plans, and other similar debts		
	Yes			
	□ res	Other. Specify VS cc		

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	2 Kimberly Macaluso Hovatter		Case number (if known)	19-31483	
4.1	Comenity Capital Bank	Last 4 digits of account number	1105		\$5,500.00
	Nonpriority Creditor's Name PO Box 183003	When was the debt incurred?	various		
	Columbus, OH 43218 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	Yes	Other. Specify Ballard cc			
4.1	Gary W. Levi	Last 4 digits of account number			\$50,000.00
	Nonpriority Creditor's Name 5 Penny Lane	When was the debt incurred?			· · · · · · · · · · · · · · · · · · ·
	Medford, NJ 08055 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	As of the date you me, the claim	s. Oneok all that apply		
	■ Debtor 1 only	Contingent			
	☐ Debtor 2 only	Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	□ No	☐ Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	■ Yes	Other. Specify Return of p	artnership captial		
4.1	Jeffrey Sponder,	Last 4 digits of account number			\$0.00
3	Nonpriority Creditor's Name	Last 4 digits of account number		_	Ψ0.00
	One Newark Center Office of the US Trustee Newark, NJ 07102	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	■ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce	that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar de	ebts	
	☐ Yes	■ Other, Specify Notice purp	ooses		

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otor 1 Edward J Hovatter Kimberly Macaluso Hovatter	Case number (if known) 19-31483	
Kenneth and Randi Friedman	Last 4 digits of account number	\$153,000.00
Nonpriority Creditor's Name		<u> </u>
836 Matlack Drive	When was the debt incurred?	
Moorestown, NJ 08057 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
☐ Debtor 2 only	■ Unliquidated	
Debtor 1 and Debtor 2 only	■ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
_	☐ Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
Is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ No		
Yes	■ Other. Specify HFSL start-up loan guaranty: 1/3 plus fees	
Lourdes Cardiology Services	Last 4 digits of account number 7065	\$939.43
Nonpriority Creditor's Name PO Box 824699 Philodolphia DA 40482 4600	When was the debt incurred? 2018	
Philadelphia, PA 19182-4699 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
Debtor 1 only	☐ Contingent	
Debtor 2 only		
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
<u> </u>	☐ Student loans	
Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Medical services	
		400,000,00
Madison Ventures LLC et al. Nonpriority Creditor's Name	Last 4 digits of account number	\$28,000.00
413 Teal Court	When was the debt incurred? 2018	
Moorestown, NJ 08057		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Settlement with Paul DiFiore, Madison Other. Specify Ventures, Inch x Inch Construction LLC	

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Needleman Management	Last 4 digits of account number	Unkno
Nonpriority Creditor's Name 1060 North Kings Highway, Suite 250	When was the debt incurred?	
Cherry Hill, NJ 08034	-	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	_ 1000 Haddonfield-Berlin Road Suite 209	
Yes	Other. Specify lease	
Networks Plus	Last 4 digits of account number	\$267
Nonpriority Creditor's Name 504 Rt. 130 Suite 110	When was the debt incurred?	
Cinnaminson, NJ 08077 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	The of the date year me, are claim to. Officer an that apply	
■ Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify	
New Jersey American Water		\$650
Nonpriority Creditor's Name PO Box 371331	Last 4 digits of account number When was the debt incurred?	\$030
Pittsburgh, PA 15250-7331		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	

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Debtor Debtor	1 Edward J Hovatter 2 Kimberly Macaluso Hovatter		Case number (if known) 19-31483	
4.2	New Jersey Urology LLC	Last 4 digits of account number	3343	\$3,304.46
	Nonpriority Creditor's Name 1515 Broad Street, Suite B130	When was the debt incurred?	2018	
	Bloomfield, NJ 07003-3002 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	_		
	Debtor 2 only	Contingent		
	_	Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	•	
	Yes	Other. Specify Medical bil	<u> </u>	
4.2	Nordstrom	Last 4 digits of account number	7215	\$5,800.00
	Nonpriority Creditor's Name	_	-	
	PO Box 79139 Phoenix, AZ 85062-9139	When was the debt incurred?	various	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	□ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify credit card		
4.2	Optimum Outcome	Last 4 digits of account number	8238	\$4,646.64
	Nonpriority Creditor's Name PO Box 660943	When was the debt incurred?	2018	
	Dallas, TX 75226-0943	_		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	☐ Yes	Other. Specify Medical bil	ı	

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2 Kimberly Macaluso Hovatter	Case number (if known) 19-3148	
South Jersey Gas	Last 4 digits of account number	\$0.0
Nonpriority Creditor's Name PO Box 557	When was the debt incurred?	
Hammonton, NJ 08037-9927 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
☐ Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
■ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
■ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did report as priority claims	ot
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Notice purposes	
Sprint	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name		Ψ0.00
PO Box 4191	When was the debt incurred?	
Carol Stream, IL 60197-4191 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only		
Debtor 2 only	☐ Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did r report as priority claims	ot
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Notice purposes	
TD Bank	Last 4 digits of account number 9369	\$16,869.29
Nonpriority Creditor's Name PO Box 84037	When was the debt incurred? Various	4.0,000.20
Columbus, GA 31908-4037		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	П	
Debtor 2 only	Contingent	
■ Debtor 1 and Debtor 2 only	☐ Unliquidated	
At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
_	Student loans	
■ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did r	ot
Is the claim subject to offset?	report as priority claims	Ot .
■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other Specify Credit card	

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	2 Kimberly Macaluso Hovatter		Case number (if known)	19-31483
4.2	Thomas Bielli	Last 4 digits of account n	umber	\$0.00
<u> </u>	Nonpriority Creditor's Name Bielli & Klauder 1500 Walnut Street Suite 900	When was the debt incurr		
	Philadelphia, PA 19102 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the	e claim is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY un	secured claim:	
	■ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of	of a separation agreement or divorce	that you did not
	Is the claim subject to offset?	report as priority claims	or a separation agreement or divorce	that you did not
	■ No	Debts to pension or prof	fit-sharing plans, and other similar de	ebts
	Yes	Other. Specify Notice	e purposes	
Part 3:	List Others to Be Notified About a I	Debt That You Already Listed		
is tryi have i	nis page only if you have others to be notifie ng to collect from you for a debt you owe to more than one creditor for any of the debts t ed for any debts in Parts 1 or 2, do not fill ou	someone else, list the original cre that you listed in Parts 1 or 2, list t	editor in Parts 1 or 2, then list the	collection agency here. Similarly, if you
Name a	nd Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
-	Smith-Miller	Line 4.6 of (Check one):	☐ Part 1: Creditors with Priori	ity Unsecured Claims
1628 . Suite	John F. Kennedy Boulevard		Part 2: Creditors with Nonp	priority Unsecured Claims
	delphia, PA 19103			
	,	Last 4 digits of account number		
Name a	nd Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
	Inch Construction LLC	Line 4.16 of (Check one):	☐ Part 1: Creditors with Priori	ity Unsecured Claims
-	eal Court		■ Part 2: Creditors with Nonp	priority Unsecured Claims
Woore	estown, NJ 08057	Last 4 digits of account number		
Name a	nd Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Jeff C		Line 4.14 of (Check one):	☐ Part 1: Creditors with Prior	ity Unsecured Claims
	er/Greenberg		Part 2: Creditors with Nonp	priority Unsecured Claims
	Market St. Suite 1050 delphia, PA 19103			
· ·······	,	Last 4 digits of account number		
	nd Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
	y Kurtzman	Line 4.12 of (<i>Check one</i>):	☐ Part 1: Creditors with Prior	
	man Steady . 2nd Street, Suite 200		Part 2: Creditors with Nonp	priority Unsecured Claims
	delphia, PA 19147			
	,	Last 4 digits of account number		
Name a	nd Address	On which entry in Part 1 or Part 2	did you list the original creditor?	
Paul [DiFiori	Line 4.16 of (Check one):	Part 1: Creditors with Priori	ity Unsecured Claims
	eal Court		Part 2: Creditors with Nonp	priority Unsecured Claims
Woore	estown, NJ 08057	Last 4 digits of account number		
Part 4:	Add the Amounts for Each Type of	Unsecured Claim		
6. Total	the amounts of certain types of unsecured o		istical reporting purposes only. 28	3 U.S.C. §159. Add the amounts for each
туре с	of unsecured claim.			01.1
	6a. Domestic support obligation	ons	Total	0.00
Total	oa. Domestic support obligation	J.1.0	σα. φ	0.00

claims

Official Form 106 E/F

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		Hovatter Macaluso Hovatter	Case n	umber (if known)	19-31483
m Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	261,794.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	261,794.00
				Tota	l Claim
	6f.	Student loans	6f.	\$	0.00
s Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	470,763.58
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	470,763.58

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Fill in this inform	mation to identify your	case:		
Debtor 1	Edward J Hovatte	er		
	First Name	Middle Name	Last Name	
Debtor 2 Kimberly Macaluso Hovatter				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		DISTRICT OF NEW JEI	RSEY	
Case number	19-31483			
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Albert Casalnova/Keller Williams Realty 802 Tilton Road Suite 202 Northfield, NJ 08225	Listing agreement for 414 14th St. Hammonton property
2.2	Sage Givens	Tulip Street, Philadelphia rental for lease: cosigner

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Fill in th	nis information to identify your			
Debtor 1				
Debtor 2	First Name Vimborly Macalus	Middle Name	Last Name	
(Spouse if,	Tanna City Indicator	Middle Name	Last Name	
United S	States Bankruptcy Court for the:	DISTRICT OF NEW JERSE	ΞΥ	
Case nu	ımber 19-31483			
(if known)	13-31-03			☐ Check if this is an
				amended filing
Offici	al Form 106H			
	edule H: Your Cod	ebtors		12/15
people a fill it out your nar	are filing together, both are equ , and number the entries in the me and case number (if known)	ally responsible for supplying boxes on the left. Attach the left. Attach the left. Attach the left. Answer every question.	ng correct information. If more sp	d accurate as possible. If two married pace is needed, copy the Additional Page, n the top of any Additional Pages, write
	No			
■ Y				
			erty state or territory? (Community o Rico, Texas, Washington, and Wis	y property states and territories include sconsin.)
☐ Y		tors. Do not include your sp	ouse as a codebtor if your spous	e is filing with you. List the person showr listed the creditor on Schedule D (Officia
For				edule D, Schedule E/F, or Schedule G to fi
	Column 1: Your codebtor Name, Number, Street, City, State and ZI	IP Code		: The creditor to whom you owe the debt schedules that apply:
2.1	Uavetter Friedman Canut	alli 9 Lavi I I D	Пол	
3.1	Hovatter Friedman Sapute 3221 NJ-38 #300	all & Levi LLP		lule D, line lule E/F, line 4.14
	Mount Laurel, NJ 08054			lule G
	Primary obligor			and Randi Friedman
			_	
3.2	Hovatter Friedman Sapute 3221 NJ-38 #300	elli & Levi LLP		lule D, line
	Mount Laurel, NJ 08054			lule E/F, line <u>4.6</u> lule G
	Joint and Several			Persing, CPA
3.3	Hovatter Friedman Sapute	alli & Lavi I I D	Поль	lulo D. lino
0.0	3221 NJ-38 #300	JIII & LUVI LLF		lule D, line lule E/F, line 4.16
	Mount Laurel, NJ 08054	I		lule G
	Joint and several per sett	iement		Ventures LLC et al.

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Debtor 1	Edward J Hovatter Kimberly Macaluso Hovatter	Case number (if known) 19-31483
	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Hovatter Friedman Saputelli & Levi LLP 3221 NJ-38 #300 Mount Laurel, NJ 08054	☐ Schedule D, line ■ Schedule E/F, line4.17 ☐ Schedule G Needleman Management
3.5	Marc and Lisa Stofman 4 Polo Ct. Cherry Hill, NJ 08003 Joint and Several	☐ Schedule D, line ■ Schedule E/F, line4.6 ☐ Schedule G Charles Persing, CPA
3.6	A. Hovatter	☐ Schedule D, line ☐ Schedule E/F, line ■ Schedule G2.2 Sage Givens

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···									
	in this information to	Edward J Ho							
	btor 2 buse, if filing)	Kimberly Ma	icaluso Hovatter						
		cy Court for the	: DISTRICT OF NEW J	ERSEY					
Case number (If known)								-	
O	fficial Form	106I				_	MM / DD/ `		<i>i</i> .
S	chedule I: \	Your Inc	ome			ľ	VIIVI / DD/	1111	12/15
sup spo atta	plying correct inforuse. If you are sepa ch a separate shee	rmation. If you arated and you	sible. If two married pec are married and not filir r spouse is not filing w On the top of any additi	ng jointly, a ith you, do	and your spouse is li not include informa	ving with ion abou	n you, incl it your sp	lude information about ouse. If more space is	ıt your s needed,
1.	Fill in your emplo	' '							
	information.			Debtor 1			_	2 or non-filing spouse	}
	If you have more t attach a separate information about	page with	Employment status	■ Emplo	•		■ Empl	loyed employed	
	employers.	additional	Occupation	Attorne	y		Billing	Clerk	
	Include part-time, self-employed wor		Employer's name	Lauletta	Birnbaum			ta Birnbaum	
	Occupation may ir or homemaker, if i		Employer's address	Suite 20	nuta Blvd. 00 NJ 08080		Suite 2	anuta Blvd. 200 , NJ 08080	
			How long employed t	here?	11 months			4 months	
Pa	rt 2: Give Det	ails About Mor	thly Income						
	mate monthly inco		ate you file this form. If	you have no	othing to report for any	line, writ	e \$0 in the	e space. Include your no	on-filing
,	ou or your non-filing see space, attach a se	•	ore than one employer, co	ombine the i	nformation for all emp	loyers for	that perso	on on the lines below. It	f you need
	,,	,	-			For De	btor 1	For Debtor 2 or	

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

2. \$ 22,000.00 \$ 3,000.00

3. Estimate and list monthly overtime pay.

3. +\$ 0.00 +\$ 0.00

4. Calculate gross Income. Add line 2 + line 3.

4. \$ 22,000.00 \$ 3,000.00

Official Form 106I Schedule I: Your Income page 1

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Debt Debt		Edward J Hovatter Kimberly Macaluso Hovatter		Case	number (if known)	19-31483		
					Debtor 1	For Debto	spouse	
	Cop	by line 4 here	4.	\$_	22,000.00	\$	3,000.0	<u>0</u>
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$_	0.00	\$	465.0	2
	5b.	Mandatory contributions for retirement plans	5b.	\$_	0.00	\$	0.0	
	5c.	Voluntary contributions for retirement plans	5c.	\$_	0.00	\$	0.0	
	5d.	Required repayments of retirement fund loans Insurance	5d.	\$_ \$	0.00	\$ \$	0.0	
	5e. 5f.	Domestic support obligations	5e. 5f.	\$ _	1,250.00 0.00	\$	0.0	
	5g.	Union dues	5g.	\$_	0.00	\$	0.0	
	5h.	Other deductions. Specify:	5h.+			+ \$	0.0	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	1,250.00	\$	465.0	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	20,750.00	\$	2,534.9	8
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.0	0
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.0	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.0	0
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.0	0
	8e.	Social Security	8e.	\$_	0.00	\$	0.0	0
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	_ 8f.	\$_	0.00	\$	0.0	<u>o</u> _
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.0	
	8h.	Other monthly income. Specify:	_ 8h.+ _	\$_	0.00	+ \$	0.0	<u>0</u>
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.0	00
10.	Cale	culate monthly income. Add line 7 + line 9.	10. \$	2	0,750.00 + \$	2,534.98	<u> </u>	23,284.98
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	ιο. Ψ		Ψ_	2,334.30	<u>'</u>	23,204.30
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depen			ed in <i>Schedu</i>	ile J. . +\$ _	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The result in the summary of Schedules and Statistical Summary of Certain lies					. \$	23,284.98
13.	Do	you expect an increase or decrease within the year after you file this form?	•				Comb	oined hly income
		No. Yes, Explain:						

Official Form 106l Schedule I: Your Income page 2

						-		
Fill	in this informa	ition to identify yo	our case:					
Deb	otor 1	Edward J Ho	vatter				k if this is:	
1	otor 2 ouse, if filing)	Kimberly Ma	caluso H	lovatter				wing postpetition chapter the following date:
Unit	ted States Bankr	ruptcy Court for the	: DISTRI	CT OF NEW JERSEY		-	MM / DD / YYYY	
Cas	se number 19	9-31483						
	nown)	7-31403						
0	fficial Fo	rm 106J						
S	chedule	J: Your l	Exper	nses				12/15
Be	as complete ormation. If m	and accurate as	possible eded, atta	. If two married people ar ich another sheet to this				
Par		ribe Your House	hold					
1.	Is this a joir							
	□ No. Go to	o line 2. es Debtor 2 live i	in a conor	ata haysahald?				
	= res. Doe		iii a sepai	ate flousefloid?				
			st file Offici	al Form 106J-2, Expenses	for Separate House	ehold of Debt	or 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.	ebtor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relat Debtor 1 or Debto		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents	names.			Daughter		22	Yes
					Daughter		27	■ No □ Yes
								□ No
								☐ Yes
								□ No
3.	Do vour ext	enses include	_	No				☐ Yes
٠.	expenses o	f people other the digital of the di	han $_{oldsymbol{\sqcap}}$	No Yes				
Est	imate your ex		our bankr	ly Expenses uptcy filing date unless y y is filed. If this is a supp				
Inc the	lude expense value of sucl	h assistance an	non-cash d have ind	government assistance i cluded it on <i>Schedule I:</i> \	f you know our Income		Your exp	oneae
(Of	ficial Form 10	JbI.)					Tour exp	U11363
4.		or home owners and any rent for the		ses for your residence. I or lot.	nclude first mortgag	e 4. \$		18,331.79
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
	4b. Prope	rty, homeowner's				4b. \$		0.00
				upkeep expenses		4c. \$		0.00
5.		owner's associat		dominium dues our residence, such as ho	me equity loans	4d. \$ 5. \$		0.00
			,	,	,	- +		~-~~

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		rd J Hovatter erly Macaluso Hovatter	Case num	ber (if known)	19-31483
6.	Utilities:				
	6a. Electric	ity, heat, natural gas	6a.	\$	350.00
	6b. Water,	sewer, garbage collection	6b.	\$	400.00
	6c. Telepho	one, cell phone, Internet, satellite, and cable services	6c.	\$	600.00
	6d. Other. S	Specify:	6d.	\$	0.00
7.	Food and ho	usekeeping supplies	7.	\$	2,500.00
8.	Childcare and	d children's education costs	8.	\$	1,000.00
9.	Clothing, lau	ndry, and dry cleaning	9.	\$	150.00
10.	Personal care	e products and services	10.	\$	250.00
11.	Medical and	dental expenses	11.	\$	350.00
12.	•	on. Include gas, maintenance, bus or train fare. e car payments.	12.	\$	400.00
13.		nt, clubs, recreation, newspapers, magazines, and books	13.	\$	50.00
		ontributions and religious donations	14.		0.00
	Insurance.			Ť ———	0.00
		e insurance deducted from your pay or included in lines 4 or 20.			
	15a. Life insi		15a.	\$	850.00
	15b. Health i	insurance	15b.	\$	1,500.00
	15c. Vehicle	insurance	15c.	\$	650.00
	15d. Other in	nsurance. Specify:	15d.	\$	0.00
16.		t include taxes deducted from your pay or included in lines 4 or 20.			
	Specify:		16.	\$	0.00
17.	Installment o	r lease payments:	47	•	
		yments for Vehicle 1	17a.		319.00
		yments for Vehicle 2	17b.	·	299.00
	17c. Other. S		17c.	·	0.00
	17d. Other. S	• •	17d.	\$	0.00
18.		nts of alimony, maintenance, and support that you did not report a m your pay on line 5, Schedule I, Your Income (Official Form 106I)		\$	0.00
19.		nts you make to support others who do not live with you.		\$	1,750.00
	Specify: Dat	ughter: utilities plus 1/3 of rent	19.		
20.	Other real pro	operty expenses not included in lines 4 or 5 of this form or on Sci	hedule I: Yo	our Income.	
	20a. Mortgaç	ges on other property	20a.	\$	0.00
	20b. Real es	state taxes	20b.	\$	0.00
	20c. Propert	y, homeowner's, or renter's insurance	20c.	\$	0.00
	20d. Mainter	nance, repair, and upkeep expenses	20d.	\$	0.00
	20e. Homeo	wner's association or condominium dues	20e.	\$	0.00
21.	Other: Specify	y:	21.	+\$	0.00
22.	Calculate you	ur monthly expenses			
	22a. Add lines	s 4 through 21.		\$	29,749.79
	22b. Copy line	e 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	· · · · · · · · · · · · · · · · · · ·
	22c. Add line	22a and 22b. The result is your monthly expenses.		\$	29,749.79
23.	Calculate voi	ur monthly net income.			
	-	ne 12 (your combined monthly income) from Schedule I.	23a.	\$	23,284.98
		our monthly expenses from line 22c above.	23b.		29,749.79
	17 7			·	
		ct your monthly expenses from your monthly income. sult is your <i>monthly net income</i> .	23c.	\$	-6,464.81
24.	For example, do modification to to.	ct an increase or decrease in your expenses within the year after to you expect to finish paying for your car loan within the year or do you expect you the terms of your mortgage?			ease or decrease because of a
	☐ Yes.	Explain here:			

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Fill in this inform	nation to identify your	case:		
Debtor 1	Edward J Hovatte	er		
	First Name	Middle Name	Last Name	
Debtor 2	Kimberly Macalus	so Hovatter		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bar	nkruptcy Court for the:	DISTRICT OF NEW JERSEY		
Case number _1	19-31483			
(if known)				☐ Check if this is ar amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NO	T an attorney to help you fill out bankruptcy forms?
■ No	
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read that they are true and correct. X /s/ Edward J Hovatter Edward J Hovatter Signature of Debtor 1 Date November 28, 2019	X /s/ Kimberly Macaluso Hovatter Kimberly Macaluso Hovatter Signature of Debtor 2 Date November 28, 2019

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Fil	l in this inforn	nation to identify you	ır case:				
De	ebtor 1	Edward J Hovat					
Da	htor O	First Name	Middle Name	Last Name			
1 -	ebtor 2 ouse if, filing)	Kimberly Macal First Name	Middle Name	Last Name			
Un	nited States Bar	nkruptcy Court for the:	DISTRICT OF NEW JE	RSFY			
	ilica Glates Dai	intropicy Court for the	BIOTHER OF HEW CE	1021			
	ase number _1 nown)	19-31483				_	Check if this is an amended filing
	fficial Fo		Affairs for Indiv	iduals Filing f	or Bankrupt	tcy	4/1:
info	ormation. If m		sible. If two married people , attach a separate sheet to estion.				
Pa	rt 1: Give D	Details About Your M	arital Status and Where Yo	ou Lived Before			
1.	What is you	r current marital stat	us?				
	■ Married						
	□ Not mar						
2.	During the la	ast 3 years, have you	ı lived anywhere other thai	n where you live now?			
	□ No						
	Yes. Lis	t all of the places you	lived in the last 3 years. Do	not include where you li	ve now.		
	Debtor 1 Pr	ior Address:	Dates Debtor lived there	1 Debtor 2 Pr	rior Address:		Dates Debtor 2 lived there
		ıry Avenue y, NJ 08226	From-To: Until 2017	■ Same as	Debtor 1		Same as Debtor 1 From-To:
		ure Avenue y, NJ 08226	From-To: 2017 to 2019	■ Same as	Debtor 1		Same as Debtor 1 From-To:
3. sta			ver live with a spouse or loalifornia, Idaho, Louisiana, N				
	■ No						
	_	ake sure you fill out Sc	hedule H: Your Codebtors (Official Form 106H).			
Pa	rt 2 Explai	n the Sources of You	ur income				
4.	Fill in the tota	al amount of income yo	mployment or from operat ou received from all jobs and a have income that you rece	l all businesses, includir	ng part-time activities	s.	ndar years?
	□ No						
	Yes. Fill	in the details.					
			Debtor 1		Debtor 2		
			Sources of income	Gross income	Sources o	f income	Gross income
			Check all that apply.	(before deductions exclusions)	and Check all t	nat apply.	(before deductions and exclusions)

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Official Form 107

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19-31483 Debtor 2 **Kimberly Macaluso Hovatter** Case number (if known) **Debtor 1** Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$253,000.00 \$34,500.00 ■ Wages, commissions, Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business \$263,787.00 \$39,000.00 For last calendar year: ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2018) bonuses, tips bonuses, tips Operating a business ☐ Operating a business For the calendar year before that: \$298,457.00 \$38,893.00 □ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) For last calendar year: **Retirement Income** \$198.982.00 (January 1 to December 31, 2018) For the calendar year before that: Cancellation of Debt \$31,650.00 (January 1 to December 31, 2017) Sale of Business \$37,465.00 **Property** Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more? Go to line 7. □ Yes List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Edward J Hovatter

Debtor 1

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Debtor 1 Edward J Hovatter
Debtor 2 Kimberly Macaluso Hovatter Case number (if known) 19-31483

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

☐ No. Go to line 7.

Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an

attorney for this bankruptcy case.

Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this payment for
Comenity Capital Bank PO Box 183003 Columbus, OH 43218	11/6, 10/8, 9/9, 8/15	\$1,967.00	\$5,500.00	 ☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
Blue Cross Blue Shield NJ	11/5, 10/22, 9/10	\$1,053.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other Health insurance
Comcast 1 Comcast Center Philadelphia, PA 19103	11/15, 10/21	\$741.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other
Shellpoint Mortgage Servicing PO Box 619063 Dallas, TX 75261-9063	11/4, 10/15, 9/9	\$54,996.00	\$1,894,628.9 3	■ Mortgage □ Car □ Credit Card □ Loan Repayment □ Suppliers or vendors □ Other
Sprint PO Box 4191 Carol Stream, IL 60197-4191	10/1, 8/27	\$692.00	\$0.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other
American Express PO Box 650448 Dallas, TX 75265-0048	10/7, 8/27	\$10,800.00	\$13,500.00	☐ Mortgage ☐ Car ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ☐ Other

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19-31483 Debtor 2 **Kimberly Macaluso Hovatter** Case number (if known) **Creditor's Name and Address** Amount you Was this payment for ... Dates of payment **Total amount** still owe paid Gino Pinto Inc. 10/4 \$0.00 \$1,850.00 ☐ Mortgage 373 S White Horse Pike ☐ Car Hammonton, NJ 08037 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Wine club subscription/membership 9/23 **Coastal Pools** \$941.00 \$1,900.00 ■ Mortgage 501 W. Patcong Avenue ☐ Car Linwood, NJ 08221 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors ■ Other Pool services 9/8 \$1,806.00 Republic Bank \$233,731.99 ■ Mortgage 50 South 16th Street ☐ Car Suite #2400 ☐ Credit Card Philadelphia, PA 19102 ☐ Loan Repayment ☐ Suppliers or vendors □ Other Madison Ventures LLC et al. 10/15 \$2,000.00 \$28,000.00 ■ Mortgage 413 Teal Court ☐ Car Moorestown, NJ 08057 ☐ Credit Card ☐ Loan Repayment ☐ Suppliers or vendors Other Settlement Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment still owe Include creditor's name paid 8/17 Daughter A. \$4,190.00 \$0.00 Milan Givens Nardone: rent

8.

Edward J Hovatter

Debtor 1

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ebtor 1	Edward J Hovatter		· ·			
ebtor 2	Kimberly Macaluso Hovatter		Cas	se number (if known)	19-31483	
Insid	er's Name and Address	Dates of payment	Total amount	Amount you	Reason for	this payment
LLP 3221	atter Friedman Saputelli & Levi I NJ-38 #300 nt Laurel, NJ 08054	10/15	paid \$2,000.00	still owe \$0.00		entures LLC et.
Dau	ghter A.	8/22	\$12,047.00	\$0.00	Thomas Je	
Dau	ghter A.	Monthly	\$2,100.00	\$0.00	Rent	
9 E.	ghter S. Aberdeen Road an City, NJ 08226	April 2019	\$10,000.00	\$0.00	Stockton U	Iniversity: tuition
Within List al modifi	Identify Legal Actions, Repossession 1 year before you filed for bankrupt I such matters, including personal injury cations, and contract disputes.	cy, were you a party in a				
_ `	es. Fill in the details.					
Case	e title e number	Nature of the case	Court or agency		Status of the	e case
Sapi	dman v. Hovatter Friedman utelli & Levi LLP et al. I-C-13-18	Breach of contract, receivership	Camden Coun Court, Chance 101 S. 5th Stre Camden, NJ 08	ry et, 1st Floor	■ Pending □ On appea □ Conclude	
LLP.	atter Friedman Saputelli & Levi , et al. v. Madison Ventures , et al. -L-757-18	Contract breach	Superior Ct. Be Civil Div. 49 Rancocas F Mount Holly, N	Rd	☐ Pending ☐ On appe	
			,		Settled	
Check	n 1 year before you filed for bankrupt call that apply and fill in the details belo No. Go to line 11. Yes. Fill in the information below. itor Name and Address			oreclosed, garnis	shed, attached	, seized, or levied? Value of the
		Explain what happene	ed			property
accor	n 90 days before you filed for bankru unts or refuse to make a payment bed No /es. Fill in the details.		cluding a bank or fi	nancial institution	n, set off any a	mounts from your
Cred	itor Name and Address	Describe the action th	e creditor took	Date taker	action was	Amount
court	n 1 year before you filed for bankrupt -appointed receiver, a custodian, or a No 'es		perty in the possess	ion of an assigne	e for the bene	fit of creditors, a

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	ebtor 1 Edward J Hovatter Ebtor 2 Kimberly Macaluso Hovatter		с	Case number (if known)	19-31483	
Pa	art 5: List Certain Gifts and Contribution	ns				
	Within 2 years before you filed for bank □ No ■ Yes. Fill in the details for each gift.	kruptcy,	did you give any gifts with a total valu	ue of more than \$600	0 per person	?
	Gifts with a total value of more than \$6 per person	600	Describe the gifts	Dates the gi	you gave fts	Value
	Person to Whom You Gave the Gift and Address:	d				
	Daughter A.		Stipend	Week	dy	\$12,000.00
	Person's relationship to you: Daughter					
	Daughter S.		Stipend	Week	dy	\$15,000.00
	Person's relationship to you: Daughter					
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or	• •	, , ,	s with a total value o	of more than	\$600 to any charity?
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co		Describe what you contributed	Dates contri		Value
Pa	art 6: List Certain Losses					
15.	Within 1 year before you filed for bankr or gambling?	uptcy o	r since you filed for bankruptcy, did yo	ou lose anything be	cause of thef	t, fire, other disaster
	■ No					
	☐ Yes. Fill in the details.					
	Describe the property you lost and how the loss occurred	Includ	ribe any insurance coverage for the lo de the amount that insurance has paid. Li ance claims on line 33 of <i>Schedule A/B: I</i>	ist pending loss	of your	Value of property lost
Do	art 7: List Certain Payments or Transfe		ance claims on line 33 of Schedule A.B. I	торену.		
	Within 1 year before you filed for bankr consulted about seeking bankruptcy or Include any attorneys, bankruptcy petition	uptcy, or	ing a bankruptcy petition?			rty to anyone you
	□ No■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any prope transferred	•	payment nsfer was	Amount of payment
	Obermayer Rebmann Maxwell & H LLP 1500 Market Street Suite 3400 Philadelphia, PA 19102		Prepetition retainer	11/6/ ⁻	19	\$5,000.00
	InCharge Debt Solutions		Credit Counseling	11/11	/19	\$25.00

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Deb	tor 2 Kimberly Macaluso Hovatter		C	Case number (i	f known) 19-3148	3
17.	Within 1 year before you filed for bankruptcy, or promised to help you deal with your creditors. Do not include any payment or transfer that you list	or to make payments			transfer any pro	perty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va	alue of any prop	erty	Date payment or transfer was made	Amount o paymen
18.	Within 2 years before you filed for bankruptcy, transferred in the ordinary course of your busi Include both outright transfers and transfers made include gifts and transfers that you have already li No Yes. Fill in the details.	iness or financial affa as security (such as the	irs?			
	Person Who Received Transfer Address	Description and va property transferre			ny property or received or debts hange	Date transfer was made
19.	Person's relationship to you Within 10 years before you filed for bankruptcy beneficiary? (These are often called asset-protect □ No ■ Year Fill in the details		/ property to a s	elf-settled trus	st or similar devi	ce of which you are a
	Yes. Fill in the details. Name of trust	Description and va	alue of the prope	arty transferre	d	Date Transfer was
				-		made
	Edward J. Hovatter Irrevocable Trust	Metlife, Prudent premiums (appr	•		nce policy	11/4/2011 to present
Par	List of Certain Financial Accounts, Instru	uments, Safe Deposit	Boxes, and Stor	age Units		
20.	Within 1 year before you filed for bankruptcy, visold, moved, or transferred? Include checking, savings, money market, or or houses, pension funds, cooperatives, associated No Yes. Fill in the details.	other financial accoun	ts; certificates o	of deposit; sha		
		ast 4 digits of ccount number	Type of account instrument	clos	e account was sed, sold, ved, or sferred	Last balance before closing o transfe
21.	Do you now have, or did you have within 1 yea cash, or other valuables?	r before you filed for	bankruptcy, any	safe deposit	box or other dep	ository for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acco Address (Number, St State and ZIP Code)		Describe the c	ontents	Do you still have it?
22.	Have you stored property in a storage unit or p	place other than your	home within 1 ye	ear before you	ı filed for bankru	ptcy?
	■ No □ Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, St State and ZIP Code)		Describe the c	ontents	Do you still have it?

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy page 7

Edward J Hovatter

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Debtor 1 Edward J Hovatter
Debtor 2 Kimberly Macaluse Hovatter

Case number (# kagus) 19-31483

Del	otor 2 Kimberly Macaluso Hovatter		Case numb	oer (if known)	19-31483			
	for someone.							
	■ No							
	Yes. Fill in the details.							
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe t	he property	1	Value		
Par	t 10: Give Details About Environmental Informa	ation						
For	the purpose of Part 10, the following definitions	apply:						
	Environmental law means any federal, state, or toxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	ir, land, soil, surface water, grou						
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		I law, whethe	er you now	own, operate, o	r utilize it or used		
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		us waste, haz	ardous sub	estance, toxic s	ubstance,		
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of wh	en they occu	rred.				
24.	Has any governmental unit notified you that you	ı may be liable or potentially liab	le under or in	violation o	f an environme	ntal law?		
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		nmental lav t	v, if you	Date of notice		
25.								
	■ No □ Yes. Fill in the details.							
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State a ZIP Code)		nmental lav t	v, if you	Date of notice		
26.	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.							
	No No							
	Yes. Fill in the details.					•		
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of t	the case		Status of the case		
Par	t 11: Give Details About Your Business or Con	nections to Any Business						
27.	Within 4 years before you filed for bankruptcy, o	did you own a business or have a	any of the foll	owing con	nections to any	business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
	■ A member of a limited liability company	(LLC) or limited liability partners	ship (LLP)					
	☐ A partner in a partnership							
	■ An officer, director, or managing execut	ive of a corporation						
	□ An owner of at least 5% of the voting or	equity securities of a corporatio	n					

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	d J Hovatter rly Macaluso Hovatter			Case number (i	19-31483			
☐ No. None	of the above applies. Go to	Part 12.						
Yes. Chee	Yes. Check all that apply above and fill in the details below for each business.							
Business Nar Address		Describe the nat	ture of the business		Identification number clude Social Security number or ITIN.			
			·	Dates bus	siness existed			
	edman & Stofman P.C.	Law practice		EIN:	46-5245572			
3221 Route Suite 300 Mount Laure		Peter Cordua, Hill Barth & Ki 220 Lake Drive Cherry Hill NJ	ng East, Suite 205	From-To	June 2014-December 2016			
	edman Saputelli & Levi	Law practice		EIN:				
LLP 3221 NJ-38 : Mount Laure	#300 el, NJ 08054	Peter Cordua,	СРА	From-To	2017-present			
Edward J. H	lovatter Esq. LLC	Law practice (trading as Hovatter		EIN:				
		Law)		From-To	2018-present			
		Peter Cordua,	CPA					
■ No	reditors, or other parties. n the details below.							
Name Address (Number, Street, C	City, State and ZIP Code)	Date Issued						
Part 12: Sign Be	low							
I have read the ans are true and correct with a bankruptcy	twers on this <i>Statement of Fi</i> ct. I understand that making a case can result in fines up to 341, 1519, and 3571.	a false statement, o \$250,000, or impri	concealing property, or	obtaining mo ears, or both.	er penalty of perjury that the answers oney or property by fraud in connection			
Edward J Hovat			ly Macaluso Hovatte					
Signature of Debte			re of Debtor 2	•				
Date Novembe	r 28, 2019	Date	November 28, 2019					
Did you attach add	litional pages to Your Statem	ent of Financial Af	fairs for Individuals Fili	ing for Bankrı	uptcy (Official Form 107)?			
■ No								
☐ Yes								
Did you pay or agre	ee to pay someone who is no	ot an attorney to he	elp you fill out bankrupt	cy forms?				
■ No								
☐ Yes. Name of Pe	erson Attach the <i>Bankru</i>	uptcy Petition Prepa	rer's Notice, Declaration,	, and Signature	e (Official Form 119).			

Fill in this info	rmation to identify your case:	
Debtor 1	Edward J Hovatter	
Debtor 2	Kimberly Macaluso Hovatter	
(Spouse, if filing	sankruptcy Court for the: District of New Jersey	
Case number	19-31483	☐ Check if this is an amended filing
(if known)	15-51405	

Official Form 122B

Chapter 11 Statement of Your Current Monthly Income

12/15

You must file this form if you are an individual and are filing for bankruptcy under Chapter 11. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known).

Part	t 1: Calculate Your Currer	t Monthly Income						
1.	What is your marital and filir	g status? Check one	only.					
	☐ Not married. Fill out Colum	nn A, lines 2-11.						
	■ Married and your spouse	is filing with you. Fill	out both Columns A and B, lines	2-11.				
	☐ Married and your spouse	is NOT filing with you	I. Fill out Column A, lines 2-11.					
ca of in	ase. 11 U.S.C. § 101(10A). For f your monthly income varied du	example, if you are filin Iring the 6 months, add For example, if both sp	from all sources, derived dur g on September 15, the 6-montl the income for all 6 months and ouses own the same rental prop pace.	n perio	d would be Mar the total by 6.	ch 1 thr Fill in th	rough August 31 ne result. Do not	. If the amount include any
				Colui Debt		Colu. Debt	mn B t or 2	
2.	Your gross wages, salary, tip payroll deductions).	os, bonuses, overtime	e, and commissions (before all	\$	22,000.00	\$	3,000.00	
3.	Alimony and maintenance particle Column B is filled in.	ayments. Do not includ	le payments from a spouse if	\$	0.00	\$	0.00	
4.	All amounts from any source of you or your dependents, if from an unmarried partner, me and roommates. Include regula filled in. Do not include payme	ncluding child support mbers of your househor ar contributions from a	rt. Include regular contributions old, your dependents, parents, spouse only if Column B is not	\$	0.00	\$	0.00	
5.	Net income from operating a business, profession, or farm		Debtor 2					
	Gross receipts (before all dedu		\$ 0.00					
	Ordinary and necessary opera		-\$ 0.00					
	Net monthly income from a bu	0 1	orm \$ 0.00 Copy here ->	\$	0.00	\$	0.00	
6.		Debtor 1	Debtor 2					
	Gross receipts (before all dedu	ıctions)	\$					
	Ordinary and necessary opera	ting expenses	-\$ 0.00					
	Net monthly income from renta	al or other real property	\$0.00 Copy here ->	*	0.00	\$	0.00	

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Edward J Hovatter Debtor 1 19-31483 **Kimberly Macaluso Hovatter** Debtor 2 Case number (if known) Column A Column B Debtor 1 Debtor 2 \$ 0.00 0.00 \$ 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 \$ For your spouse 0.00 Pension or retirement income. Do not include any amount received that was a 0.00 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. \$ \$ \$ 0.00 \$ 0.00 Total amounts from separate pages, if any. \$ 0.00 \$ 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for each column. 22,000.00 + \$ 3,000.00 =|\$ 25,000.00 Then add the total for Column A to the total for Column B.

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Debtor 1 Debtor 2	Edward J Hovatter Kimberly Macaluso Hovatter		Case number (if known)	19-31483
Part 2:	Sign Below			
_	By signing here, under penalty of perjury I decla		•	
2	X /s/ Edward J Hovatter	X	/s/ Kimberly Macaluso Hov	
	Edward J Hovatter Signature of Debtor 1		Kimberly Macaluso Hovatt Signature of Debtor 2	er
Dat	e November 28, 2019	Date	November 28, 2019	
	MM/DD/YYYY		MM / DD / YYYY	

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United States Bankruptcy Court District of New Jersey

In re	Edward J Hovatter Kimberly Macaluso Hovatter			19-31483	
		Debtor(s)	— Chapter	11	

VERIFICATION OF CREDITOR MATRIX

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date:	November 28, 2019	/s/ Edward J Hovatter	
		Edward J Hovatter	
		Signature of Debtor	
Date:	November 28, 2019	/s/ Kimberly Macaluso Hovatter	
		Kimberly Macaluso Hovatter	
		Signature of Debtor	